



TRANSMITTAL FORM

(to be used for all correspondence during pendency of filed application)

Application Number	10/726,803
Filing Date	December 2, 2003
First Named Inventor	Thomas J. Maginot
Group Art Unit Number	3738
Examiner Name	Paul B. Prebilic
Total Number of Pages in This Submission	7
Attorney Docket Number	22220-08626

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input checked="" type="checkbox"/> Check Enclosed (\$120.00) <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input checked="" type="checkbox"/> Amendment/Response: 4 Page(s) <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) [] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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REMARKS:

SIGNATURE OF ATTORNEY OR AGENT

Signature:			
Attorney/Reg. No.:	Albert C. Smith, Reg. No. 20,355	Dated:	4/14/06

CERTIFICATE OF MAILING

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.

Signature:			
Typed or Printed Name:	Albert C. Smith	Dated:	4/14/06
Express Mail Mailing Number (optional):			

<div style="display: flex; align-items: center; justify-content: center;"> <div style="border: 2px solid black; border-radius: 50%; padding: 10px; margin-right: 10px; text-align: center;"> OFFICE APR 17 2006 RECEIVED </div> <div> <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2006</h2> <p style="font-size: small;">Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> </div> </div>		Complete if Known	
		Application Number	10/726,803
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		First Named Inventor	Thomas J. Maginot
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TOTAL AMOUNT OF PAYMENT		(\$ 120.00)	

<h3 style="margin: 0;">METHOD OF PAYMENT (check all that apply)</h3> <p> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p><input type="checkbox"/> Deposit Account:</p> <p>Deposit Account Number: 19-2555</p> <p>Deposit Account Name: Fenwick & West LLP</p> <p>The Commissioner is authorized to: (check all that apply)</p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments </p> <p> <input checked="" type="checkbox"/> Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application </p> <p> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p>	<h3 style="margin: 0;">FEE CALCULATION (continued)</h3> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <h4 style="margin: 0;">3. ADDITIONAL FEES</h4> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left; font-weight: normal;">Large Entity</th> <th colspan="2" style="text-align: left; font-weight: normal;">Small Entity</th> <th style="text-align: left; font-weight: normal;">Fee Description</th> <th style="text-align: right; font-weight: normal;">Fee Paid</th> </tr> <tr> <th style="font-weight: normal;">Fee Code</th> <th style="font-weight: normal;">Fee (\$)</th> <th style="font-weight: normal;">Fee Code</th> <th style="font-weight: normal;">Fee (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath or declaration</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>120</td><td>2251</td><td>60</td><td>Extension for reply within first month</td><td style="text-align: right;">✓ 120.00</td></tr> <tr><td>1252</td><td>450</td><td>2252</td><td>225</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>1020</td><td>2253</td><td>510</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,590</td><td>2254</td><td>795</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,160</td><td>2255</td><td>1,080</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>500</td><td>2401</td><td>250</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>500</td><td>2402</td><td>250</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>1000</td><td>2403</td><td>500</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>500</td><td>2452</td><td>250</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,500</td><td>2453</td><td>750</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,400</td><td>2501</td><td>700</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>800</td><td>2502</td><td>400</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>1100</td><td>2503</td><td>550</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td></td><td>1460</td><td></td><td>Petitions to the Director</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee for Provisional Applications</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>790</td><td>2809</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>790</td><td>2810</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>790</td><td>2801</td><td>395</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="6">Other fee (specify) _____</td></tr> <tr> <td colspan="4" style="text-align: right; 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SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Albert C. Smith	Registration No. (Attorney/Agent)	20,355	Telephone	650.335.7296
Signature				Date	4/14/06